

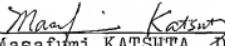
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/533,107-Conf. #4845
	Filing Date	July 20, 2005
	First Named Inventor	Takashi Funatsu
	Art Unit	1743
	Examiner Name	B. J. Sines
	Attorney Docket Number	09864/0207779-US0

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with Customer Number: **OR** Firm or Individual Name Address City Country State Zip Telephone Email

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**Signature Name Date Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of forms are submitted.